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APPLICANTS

Ronald S. Cok, Rochester, NY;
 Jeffrey P. Serbicki, Holley, NY;
 Joseph E. Yokajty, Webster, NY;

** CONTINUING DATA ***** *NONE T.D*

** FOREIGN APPLICATIONS ***** *NONE T.D*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>V. M. D. C.</i> Examiner's Signature Initials	STATE OR COUNTRY NY	SHEETS DRAWING 3	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
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ADDRESS

Paul A. Leipold
 Patent Legal Staff
 Eastman Kodak Company
 343 State Street
 Rochester, NY
 14650-2201

TITLE

Integrated touch screen and OLED flat-panel display

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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